DOCUMENT # A0100000501

1. Entity Name

RUBBER RESOURCES, LTD., LLLP

FILED

03 OCT -7 PM 4: 15

Principal Place of Business 17212 U.S. 19 HUDSON FL 34667		Mailing Address 17212 U.S. 19 HUDSON FL 34667		SECRETARY OF STATE TALLAHASSEE FLORIDA	
		1 2			
2. Principal Place of Business		3. Mailing Address		1017 The state that the state of the state o	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY SEPTEMBER 24, 2003	
City & State		City & State		4. FEI Number 59-3709918	
Zip	Country	Zip	Country	5. Certificate of Status Desired	
6. Name and Address of Current Registered Agent			None	7. Name and Address of New Registered Agent	
- HAWKER-	DALE D		Name		
17212 U.S. 19			Street Addre	ess (P.O. Box Number is Not Acceptable)	
HUDSON FL 34667					
			City	FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.					
Sapital Contributions as Shown on record. Sapital Contributions as Shown on record. Sapital Contributions in FLORIDA to date the sapital cont				11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
12.	NOTE: General Partners MA GENERAL PARTNER		ne torm; an amendr ■ 13.	ment must be filed to change a general partner. ADDRESS CHANGES ONLY	
DOCUMENT #	GENERAL FARTNER	INFORMATION		ADDRESS OF ANGES ONE	
NAME	HAWKER, DALE D		STREET ADDRESS		
STREET ADDRESS 17212 U.S. 19 CITY-ST-ZIP HUDSON FL 34667			CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS	000022444990 08/20/0301037001 **150.00	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT / NAME		July Sa	STREET ADDRESS	000022444990 10/03/0301070006- **129-65	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT # NAME			STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		. <u>.</u>	CITY-ST-ZIP		
DOCUMENT / NAME ,			STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

September 30, 2003

Department of State
Division of Corporations Reinstatement Section
409 E. Gaines St.
Tallahassee, FL 32399

Re: A0100000501

Attention: Michelle Hodges

Dear Ms. Hodges

Per our conversation today, I am writing this letter to follow up on our corporate filing. I had not received the form to file until I received the one in August telling us we had not filed by May 1st. I am enclosing a check for the balance of what we owe.

I do appreciate your taking the time to explain what this is for and will file future forms on time or call if I don't receive them.

Sincerely,

Penny Dzik

Secretary

Rubber Resources